Transaction Form For STP & SWP



Please refer to the general instruction	ns for assistance and con	nplete all sections in Engl	ish. For legibility, please use BLO	CK LETTERS in black	or dark ink.	Tim	e Stamp
Distributor/RIA Code	Sub-D	Distributor ARN	Sub-Distributor C	ode	EUIN		nch Code
nitial Commission will be paid by	•			-	•		
Transaction Charges: SEBI (Mutual investments sourced by him. The transot ransaction charges would be lev investor's Declaration where EUIN is no person of the above distributor and/or in the second second results in the second results are second results.	t furnished: I/We confirm th	at the EUIN box has been int	entionally left blank by me/us as this	is an "execution only" tra	ansaction without any interactio	n or advice by the employee	relationship manager/sales
		⊯ 2nd Ap	policant				
1. APPLICANT INFO	RMATION	æ zna A	phoant		2 ord Applicant		
		Name	Middle Name		Last Name	Folio No.	1 1 1 1 1
Name of Sole/1st Unit Hold PAN/PEKRN**	First Unit Holde			n it Ho der	Last Name	Third Unit Hold	er
KIN*	rst Uhit Holder		Se¢ond Ur	lit Ublddr I I		Third Unit Hold	dor I I I I
	1						
Date of Birth* (1st Unit Holder)	D D M M Y Y	Date of B	irth* (2nd Unit Holder)	MMYYYY	Date of Birth* (3rd	Unit Holder)	MIMIYIYIY
Mobile No. +91-		aladaa	E-mail ID	ulusal for \$81 1	Amounto contr. Dr. To contr.		
KYC is mandatory. Please enclo ^ 14 digit KYC Identification Nui							
2. SYSTEMATIC WITH	DRAWAL PLAN	(SWP) - Please n	ote that the value of the	unit balance in t	he source scheme sh	ould be at least Rs	. 25,000
Scheme Name L&T				Option (✓) ☐ Gr	owth O IDCW Payout	○ IDCW Reinvestme	ent ○ Bonus^
IDCW Frequency (√where	ver applicable)	Daily O Weekly	/ O Monthly* O Q	uarterly O Ann	ual^ O Semi-Annual	^	
Withdrawal preference (✓)	OAmount (₹)		OR O	Capital Appreci	ation (Available for GR	OWTH plan only)	
Withdrawal frequency (✓)	-	O Quarterly	○ Semi-Annual	○ Annual			
Withdrawal date (✓) ○ 1st ^Available in select schen		* O 15th O 20th O	25th O 28th Withdrawal _I	period From M	M Y Y Y Y To	M M Y Y Y Y	OR O Till balance
3. SYSTEMATIC TRAN	ISFER PLAN (S	TP) - Please note	that the value of the unit	balance in the so	ource scheme should	be at least Rs. 25,0	000
Scheme Name L&T				Option (✓) ○ G	rowth O IDCW [®] Payo	ut O IDCW@ Reinve	estment O Bonus^
IDCW [®] Frequency (√wher	ever applicable) 〇	Daily O Weekly	○ Monthly* ○ Quar	terly O Annual^	○ Semi-Annual^		
To Scheme L&T				Option (✓) ○ G	rowth O IDCW [@] Payo	ut O IDCW [@] Reinve	estment O Bonus^
DCW [®] Frequency (✓ wher [®] Note: IDCW stands for 'Inc sale price that represents re in accordance with the Regu	ome Distribution cui alized gains, as ma	m Capital Withdrawa ay be declared by the	nl option'. The amounts can e Trustees at its discretion	be distributed out from time to time	(subject to the available	lity of distributable s	urplus as calculated
Transfer preference (✓) ○ A	amount (₹)	OR Capita	Appreciation (Available for GI	ROWTH plan only) F	rom	To	OR O Till balance
	○ Daily ○ Weekly	O Mon*	Tue O Wed	○ Thu	○ Fri		
, , ,	○ Fortnightly		15th*	O IIIu	O I II		
	Monthly*		5th	0 10th*	○ 15th ○ 20		○ 28th
Default option if not selec	Quarterly	○ 1st ○ ilable in select sch	5th 7th	○ 10th	○ 15th ○ 20	th O 25th	○ 28th
Note: Effective February 1, 2	021, units will be all	otted only upon rece	ipt of subscription amount	by the Fund Hous	e for utilisation irrespe	ctive of any scheme	category/investmen
amount. Net Asset Value (NA	· · · · · · · · · · · · · · · · · · ·		•		transactions registered	prior or post Februai	y 1, 2021.
4. DECLARATION, CO We have read and understo or been induced by any rebegistered distributors based ommissions to me/us (in tra We hereby accord my/our offormation as and when prony statutory or judicial authory	od the respective So ate or gifts, directly on my/our assessn il commission or any onsent to disclose, vided by me/ us to t	theme Information D or indirectly in makinent of various factor other), payable to he share, remit in any the group companie	ocument, Statement of Adding this transaction. I/We upers including the service remains for different schemes of form, mode or manner, all/s of L&T Financial Service	ditional Information inderstand that the endered by the dis from the distribution of the information any of the information any of the information in the information	e upfront commission was tributor. Also, the AMF or amongst which the station provided by me/u	will be paid directly bild registered distribute scheme is being recons, including all changes	y me/us to the AMF for has disclosed the ommended to me/us ges, updates to suc
			·			- (-1)	
	st Unit Holder)				_	(Third Unit Hold	<u>lei)</u>
ACKNOWLEDGEME						(7)	L&T Financial Service
folio No.	Received from	n	Name of the S	ole/First Unit Hold	er	Ecr	Office Use Only
Scheme/Plan/Option							
SWP Instalment amount STP Instalment amount			(✓) ○ Monthly ○ Quart(✓) ○ Daily ○ Week	•			nowledgement stamp & Date

GENERAL INSTRUCTIONS

Please read the below instructions carefully before filling the form. Please fill up the form in English in BLOCK LETTERS with black or dark ink. All information sought in the form is mandatory except where it is specifically indicated as optional. All instructions & notes are subject to SEBI & AMFI guidelines as amended from time to time. Please note in case of any error while filling the form all applicants must sign against the corrections.

Applicant Information: Please furnish the Folio Number, Name and PAN of Sole
 / First Applicant Section 1 of the Form. Your investment would be processed in the
 specified folio.

Your personal information and bank account details would apply to this investment as well

Contact Details: Please provide the Mobile Number and E-Mail Address of the Sole / First Applicant in the form in case of Individuals and Key Contact in case of Non Individuals. This would help us seamlessly communicate with you on your investments

Permanent Account Number (PAN): Furnishing of PAN is mandatory for all applicants except where specific dispensation is provided under law.

2. Systematic Withdrawal Plan (SWP):

- a. The minimum withdrawal size is Rs.500 except for L&T Liquid Fund and L&T Cash Fund. For L&T Liquid Fund and L&T Cash Fund it is Rs. 1000.
- b. SWP will be registered within 7 calendar days from the date of your request.
- c. You can cancel a registered SWP at any time by submitting a written request. The cancellation will be processed within 15 days.
- If your SWP request specifies both amount and units, the SWP will be processed on the basis of amount.
- If the scheme/plan/option is not mentioned and there is only one scheme/plan/ option available in the folio, the same will be processed.

3. Systematic Transfer Plan (STP):

- a. The minimum transfer size is Rs.500 except for L&T Liquid Fund and L&T Cash Fund. For L&T Liquid Fund and L&T Cash Fund it is Rs. 1000.
- b. STP will be registered within 7 calendar days from the date of your request.
- You can cancel a registered STP at any time by submitting a written request. The cancellation will be processed within 15 days.

- d. If the plan/option if the source scheme is not mentioned and there is only one plan/option available in the folio, the STP will be processed.
- If the plan/option of the target scheme is not mentioned, the STP will be processed as per the default options mentioned in the Scheme Information Document of the respective scheme.
- f. In case the criterion of the minimum amount for the purpose of transfer of units under the STP facility is not met, the AMC reserves the right to discontinue the STP/cancel the registration for STP..
- g. Daily STP is availble only for fixed amounts.
- h. STP transfers can be made on a daily basis i.e. Monday to Friday subject to such days being business days.
- Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021.
- 4. Signatures: All signatures should be in English or any other Indian Language. Thumb impressions should be from the left hand in case of males and right hand in case of females. All such thumb impressions need to be attested by a Magistrate, Notary Public or Special Executive Magistrate under his/her official seal.
- 5. Employees Unique Identification Number (EUIN): If you are making this investment based on an investment advise received from your distributor, please quote the Employees Unique Identification Number (EUIN) of your relationship manager in the Application Form.

If your distributor has, however, not given you any advice pertaining to the investment or your investment decision is not withstanding the advice provided by your distributor regarding inappropriateness of the scheme vis-a-vis your investment needs, the EUIN box may be left blank. In this case, please sign in the space provided in Section B to confirm your acceptance to the declaration stated therein.

call 1800 4190 200 or 1800 2000 400

email investor.line@Intmf.co.in

www.ltfs.com

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